



20374

PATENT TRADEMARK OFFICE

Declaration For U.S. Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled (INSERT TITLE) _____
NEAR INFRARED-CUTTING MATERIAL AND PROCESS FOR PRODUCTION THEREOF

the specification of which

(Check one
of 1, 2, or 3.)

1. ☒ is attached hereto.

2. _____ was filed on _____ as
International PCT Application No. _____
and was amended on _____
(if applicable)

3. _____ was filed on _____ as
U.S. Application Serial No. _____
and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application for which priority is claimed:

(List prior foreign applications.)				Priority Claimed		
	<u>2001-071747</u>	<u>Japan</u>	<u>14/03/2001</u>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	(Number)	(Country)	(Day/Month/Year Filed)			
	_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	(Number)	(Country)	(Day/Month/Year Filed)			
	_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	(Number)	(Country)	(Day/Month/Year Filed)			

_____ See attached list for additional prior foreign applications

I hereby claim the benefit under Title 35, United States Code, § 120, of any United States patent application listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

_____ (Application Serial No.)

_____ (Filing Date)

_____ (Status)

And I hereby appoint as principal attorney and agent Ronald J. Kubovcik, Reg. No. 25,401; and Keiko T. Kubovcik, Reg. No. 40,428.

Please direct all communications to the following address:

Kubovcik & Kubovcik
The Farragut Building
Suite 710
900 17th Street, N.W.
Washington, D.C. 20006
Phone: (202) 887-9023
Fax: (202) 887-9093

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first or sole inventor: Toshinori MARUTSUKA

Inventor's Signature: *Toshinori Marutsuka* Data: February 25, 2002

Residence: Chiba, Japan

Citizenship: Japan

Post Office Address: c/o Nisshinbo Industries, Inc., R & D Center

1-2-3, Onodai, Midori-ku, Chiba-shi, Chiba 267-0056, Japan

Full name of second inventor: _____

Inventor's Signature: _____ Data: _____

Residence: _____

Citizenship: _____

Post Office Address: _____

Full name of third inventor: _____

Inventor's Signature: _____ Data: _____

Residence: _____

Citizenship: _____

Post Office Address: _____